Fatal Malposition in Labor

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FETAL MALPOSITION IN LABOR

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BACKGROUND / INTRODUCTION

- Occipitoposterior (OP) position is the most common malpresentation confronted by obstetricians (Sizer and Nirmal 2000)
- Incidence of persistent OP position has impact on laboring outcome (Fitzpatrick et al. 2001)
- Higher incidence of prolonged labor and pregnancy
- Back labor is common which can increase the use of epidurals
- Contributes disproportionately to cesarean and instrumental delivery (vacuum or forceps)

- A change in patient’s position can positively impact fetal position and affect delivery outcome (Simkin and Acheti, 2011)
- Assist in Fetal Position Change/Movement
- Alter forces of gravity and pressures on pelvic joints

PICO QUESTION

In laboring women who know their baby is in the OP position, will introducing new maternal positions that open up the mother’s hips, help rotate the fetal presentation from OP to OA and impact the delivery outcome?

OUTCOMES

- 60% of the nurses who participated in the data collection implemented a positioning change intervention for their patients
  - 56% experienced a change from the OP position
  - 16% delivered via C-Section
  - 89% delivered vaginally

- 40% of the nurses that participated in the data collection did not implement a positioning change intervention for their patients
  - 16% experienced a change from the OP position
  - 33% delivered via C-Section
  - 67% delivered vaginally

Sample Size n=14

CONCLUSIONS

- Occipitoposterior (OP) position has a negative impact on laboring outcome
- When implemented, positioning changes of the laboring patient has a impact on changing the fetal position which can positively impact the delivery outcome
- Positioning changes are a non-invasive method to assist in fetal position movement and change
- Barriers that affected the data collection were completion of the data collection form for all OP patients, implementing the position interventions by the nursing staff, and proper position assessment by the physicians

METHODS

- Repositioning education provided via TLC regarding OP malpresentation and the nursing inventions available to assist in fetal positional change
  - Forward leaning
  - Open knee & chest
  - Hands and knees
  - Side lying with peanut ball
  - Kneeling and straddling
  - Lunges

- Supportive visual materials placed in patient rooms to facilitate variety of positional changes

- Quantitative data on fetal position, nursing interventions, and delivery outcome collected from several nurses on the LVHN Labor & Delivery unit over the course of one month

RESULTS

Impact of Nursing Interventions on Fetal Presentation and Delivery Outcome

REFERENCES


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